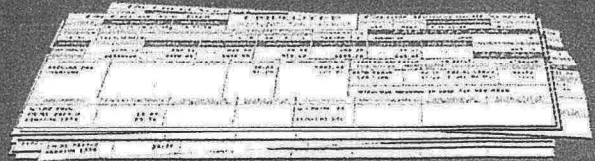


City of New York



ESTUBS



Pay Statement

Pay Period	Pay Date	Check Num	Payroll #	Work Unit	Distribution #	Pension #
04/21/2024 05/04/2024	05/10/2024			1645	F880	J
Employee Name	Employee Num	JSN	Federal MS Exempt	State MS Exempt	Electronic Fund Transfer Info	
MOHAMED MOSHSIN A		1	G NA	A 00	Active	

Federal W4	Claim Dependents:	Other Income:	Other Deductions:
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Totals	Gross Pay	Deductions	Net Pay
This Period	10541.30	6129.76	4411.54
Year to Date	113888.73	65910.22	47978.51

Taxes	Federal Tax	Social Security	Medicare	State Tax	City Tax	City Waiver
This Period	1770.30	649.97	152.00	624.89	369.15	
Year to Date	19043.77	7023.38	1642.56	6938.96	3979.21	

Payments

Description	Prior Period		This Period	
	Units/Hours	Amount Earned	Units/Hours	Amount Earned
RECURRING REGULAR GROSS			80:00	5212.82
PAID OVERTIME	6:00	624.58	39:00	4059.76
HOURLY NIGHT SHIFT DIFFERENTIAL	8:00	52.37	40:00	261.85
PENSIONABLE LONGEVITY INCREMENT				15.30
NEW UNIFORMED LONGEVITY (NOT INCLUD IN 10% NIGHT DIFF)				314.62

Deduction

Description	Amount this Period	Goal Amt or # Installments	Balance Due or Installments left
SANITATION OFFICERS ASSOC INS.	23.94		
MUNICIPAL CREDIT UNION	260.00		
NEW YORK COLLEGE SAVINGS	100.00		
SANITATION-20YR HEALTH INS	57.98		
HIP HMO MCP NY BASIC			
HIP HMO MCP NY BASIC			
SANITATN 20YR PENSN (414H) SD	563.96		
SANITATION OFFICERS ASSN	60.97		
457 TAX DEFERRED SAVINGS PLAN	1496.60	23000.00	6804.51

Leave Balances

As of: 04/27/2024

Description	Balance Avail HH:MM / DDD	Description	Balance Avail HH:MM / DDD
COMPENSATORY TIME		HOLIDAY COMP TIME	
VACATION LEAVE (HH:MM)		LEAVE USED FOR FMLA PURPOSES	